, (3) 33 8 1 7

PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number

L					_				_		•		
	CLAIMS AS FILED - PART I							SMALL ENTITY TYPE		OF	_	OTHER THAN SMALL ENTITY	
U.S. NATIONAL STAGE FEES				olumn 1)	1	(Column 2)	7	,		-	, SMALL	ENITY	
┝		- COTACL I LLO			 		┦	RATE	FEE	4	RATE	FEE	
BASIC FEE			SMALL ENT. = \$ 150		LARGE ENT. = \$ 300			BASIC FEE	/.	OF	BASIC FEE	300	
EXAMINATION FEE			(4) =	Satisfies PCT Article 33(1)- (4) = \$50/\$100		other situations = \$ 100 / \$ 200		EXAM. FEE			EXAM. FEE	200	
SEARCH FEE			ALL other	U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400		All other situations = \$ 250 / \$ 500		SEARCH FEE	T· \		SEARCH FEE		
FEE FOR EXTRA SPEC. PGS.			42	42 minus 100 =		/ 50 =		X \$ 125 =		7	X \$ 250 =	- 	
TOTAL CHARGEABLE CLAIMS			17	minus 20 =			1	X \$ 25 =		OR	X \$ 50 =	 	
INDEPENDENT CLAIMS			1	minus 3 =				X \$ 100 =		OR	X \$ 200 =	+	
MU	LTIPLE DEPE	NDENT CLAIM PI	RESENT	1				+ \$ 180 =		OR	+ \$ 360 =	† -	
* 1	f the differen	ce in column 1 is	ero, enter "0	" in c	olumn 2		TOTAL	 	OR	TOTAL	FADO		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 2) (Column 3) (Column 4) (Column 4) (Column 4) (Column 5) (Column 6) (Column 6) (Column 6) (Column 6) (Column 7) (Column 7) (Column 7) (Column 7) (Column 8) (Col					(Column 3)		SMALL		OR	OTHER SMALL			
AMENDMENT A					EST BER	PRESENT EXTRA		RATE	ADDI- TIONAL	7	RATE	ADDI- TIONAL	
	Tatal	AMENDMENT	<u> </u>	PAID F	OR		ŀ		FEE	4		FEE	
	Total	 	Minus -			=	ŀ	X \$ 25 =	<u> </u>	OR	X \$ 50 =		
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRE	SENTATION OF M	MULTIPLE DE	EPENDENT C	LAIM			+ \$ 180 =	-	OR	+ \$ 360 =		
							-	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Columi	n 2)	(Column 3)		÷					
AMEND		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOU PAID FO	ST ER ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	Γ	X \$ 25 =		OR	X \$ 50 =		
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+ \$ 180 =		OR	+ \$ 360 =			
TOTAL ADDIT. FEE										OR L	TOTAL ADDIT. FEE		
' H	the entry in colu	ımn 1 is less than the	entry in column	1 2. write "0" in o	okumo :	3 . ·		•				-	
•			,			•							

FORM PTO-875 (Rev. 02/2005)

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.